

2018 Current Fiscal Year Report: Advisory Council for the Elimination of Tuberculosis

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1. Department or Agency

Department of Health and Human Services

2. Fiscal Year

2018

3. Committee or Subcommittee

Advisory Council for the Elimination of Tuberculosis

3b. GSA Committee No.

776

4. Is this New During Fiscal Year?

No

5. Current Charter

03/15/2019

6. Expected Renewal Date

03/15/2021

7. Expected Term Date

8a. Was Terminated During Fiscal Year?

No

8b. Specific Termination Authority

Not Applicable

8c. Actual Term Date

9. Agency Recommendation for Next Fiscal Year

Continue

10a. Legislation Req to Terminate?

Not Applicable

10b. Legislation Pending?

Not Applicable

11. Establishment Authority Statutory (Congress Created)

12. Specific Establishment Authority

Section 317E(f) of the PHS Act, [42 U.S.C.

§247b-6(f)], as amended; (Section 2(b), Public Law 101-368

13. Effective Date

08/15/1990

14. Committee Type

Continuing

14c. Presidential?

No

15. Description of Committee Scientific Technical Program Advisory Board

16a. Total Number of Reports

No Reports for this Fiscal Year

17a. Open Meetings and Dates 3 17b. Closed Meetings and Dates 0 17c. Partially Closed Meetings and Dates 0 17d. Total Meetings and Dates 3

Purpose	Start	End
Full committee meeting to discuss topics related to (1) Update on preliminary tuberculosis funding formula; (2) Update on whole genome sequencing data sharing plan; (3) Update on three-month Isoniazid/Rifapentine Regimen (3HP) guidelines; (4) Updates from ACET workgroups; and (5) other tuberculosis-related issues.	12/11/2017	12/12/2017
Full committee meeting to discuss topics related to (1) Update on Report of Verified Case of Tuberculosis (RVCT) revision; (2) Overview of Division of Global Migration and Quarantine (DGMQ) TB Technical Instructions; (3) Update on healthcare workers screening guidelines; (4) Updates from ACET workgroups; and (5) other tuberculosis-related issues.	04/17/2018	04/17/2018
Full committee meeting to discuss topics related to (1) Isoniazid-Rifapentine TB prevention in HIV-infected persons study; (2) Division of HIV/AIDS prevention strategy of adopting HIV Treatment as Prevention; (3) Update on Division of Tuberculosis Elimination's concept of operations for Latent Tuberculosis Infection Surveillance; and (4) Updates from ACET workgroups.	08/21/2018	08/21/2018

Number of Committee Meetings Listed: 3

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	\$8,250.00	\$10,000.00
18a(2). Personnel Pmts to Federal Members	\$0.00	\$0.00
18a(3). Personnel Pmts to Federal Staff	\$110,547.00	\$112,648.00
18a(4). Personnel Pmts to Non-Member Consultants	\$0.00	\$0.00
18b(1). Travel and Per Diem to Non-Federal Members	\$11,092.00	\$12,067.00
18b(2). Travel and Per Diem to Federal Members	\$0.00	\$0.00
18b(3). Travel and Per Diem to Federal Staff	\$0.00	\$0.00
18b(4). Travel and Per Diem to Non-member Consultants	\$0.00	\$0.00
18c. Other(rents,user charges, graphics, printing, mail, etc.)	\$9,879.00	\$9,979.00
18d. Total	\$139,768.00	\$144,694.00
19. Federal Staff Support Years (FTE)	0.71	0.71

20a. How does the Committee accomplish its purpose?

The Council accomplishes its purpose by reviewing Department of Health and Human Service (HHS) policies, plans and procedures; by advising on emerging problems in tuberculosis (TB) control; by developing guidelines and recommendations related to TB elimination; and by forming temporary workgroups to address specific TB elimination issues.

20b. How does the Committee balance its membership?

Specific expertise is represented in the fields of TB diagnosis, treatment, prevention, and control; public health; infectious diseases; epidemiology; pulmonary disease; pediatrics; and microbiology. The Council membership is composed of experienced, credible, and recognized experts with authoritative and diverse points of view necessary to succeed in the elimination of TB. The recruitment process ensures that members are fairly balanced by geographic region, race/ethnicity, gender, expertise and perspective.

20c. How frequent and relevant are the Committee Meetings?

The Council meets three times annually on issues relevant to elimination of tuberculosis as outlined in the Council's charter. These include recommendations regarding policies, strategies, objectives, and priorities; addressing the development and application of new technologies; and providing guidance to CDC. In December 2017, ACET voted and established an ACET Latent Tuberculosis Infection (LTBI) Workgroup. The workgroup was charged to assist in developing a strategic plan for LTBI with an eye toward the ultimate goal of TB elimination with the United States. The three basic elements of this plan will be: 1) to determine the best methods to identify persons at risk for LTBI and strategies to get them appropriately tested, with the results being part of their permanent medical records; 2) to briefly address treatment, the need to treat those who should be

treated and that there are now several regimens that can be used; and 3) to be sure that even those persons with LTBI who are not treated and their care givers know their status to hasten their diagnosis should they develop signs and symptoms of TB disease. The workgroup has been gathering background data, such as articles related to LTBI and existing LTBI guidelines from states. The workgroup plans to provide preliminary report of findings to the full Advisory Council at the December 11-12, 2018 ACET meeting. In FY-18, the ACET Drug Supply workgroup convened in December 2017 and had their first meeting on April 4, 2018. The workgroup reviewed the charge issues by the parent committee to: 1) identify strategies to ensure an uninterrupted drug supply for treating TB disease and LTBI; and 2) address drug pricing manufacturing issues and distribution shortages. The workgroup will address potential solutions regarding interruption of the drug and biologics supply chain needed for testing, treating latent tuberculosis infection (LTBI), and active TB disease. The intended outcome is ensuring an uninterrupted supply of drugs nationwide and to remove any barriers to access, including costs. The workgroup provided an update to the full Advisory Council at the August 21, 2018 meeting. In 2018, ACET Congregate Setting Workgroup provided updates on the workgroup's activities. The workgroup continues to move forward with its charge by addressing and identifying strategies for TB in correctional and homeless setting for consideration by ACET. Additionally, investigation of TB exposure in multiple setting is being addressed by the workgroup. The outcome is intended for ACET to forward recommendations to CDC that may increase representation of congregate settings in CDC guidance and the agency's approach to TB care among these populations at high risk. In 2018, ACET Child and Adolescent Workgroup provided updates on the workgroup's activities. The workgroup continues to address potential strategies for diagnosis, treatment, and prevention of TB disease among children and adolescents for ACET to consider. In 2018, ACET Essential Component Workgroup will submit the Essential Components of Public Health Tuberculosis Prevention, Control, and Elimination Program report to ACET. On July 6, 2018, ACET submitted correspondence to the HHS Secretary that addresses four TB areas of concern that continue to be paramount during ACET deliberations. The concerns are as follows: 1) intermittent shortages of anti-TB drugs, particularly second-line drugs; 2) TB in congregate settings, with particular emphasis on correctional institutions and homeless settings; 3) TB among persons along the US-Mexico border; and 4) strengthening the TB public health infrastructure.

20d. Why can't the advice or information this committee provides be obtained elsewhere?

The Council is necessary because tuberculosis remains a serious public health issue and has a disproportionate impact on racial/ethnic minorities in the United States. It is critical for the Council to continue to play a role in advising HHS on tuberculosis elimination

strategies. The Council will continue to: 1) provide guidance regarding TB elimination strategies; 2) provide advice on laboratory testing for TB and drug resistance; 3) provide advice on new diagnostics and drugs to fight TB; 4) provide advice on TB management and care; 5) provide guidance on TB in correctional settings; 6) provide guidance on TB issues on the US/Mexico border; 7) provide guidance on redefining the Essential Components of an Effective TB Program; 8) provide advice on TB outbreaks occurring in special populations, particularly the homeless; 9) provide guidance on TB drug and diagnostic shortages; and 10) provide guidance on implementation of expanded LTBI testing and treatment as recommended by U.S. Preventive Services Task Force (USPSTF).

20e. Why is it necessary to close and/or partially closed committee meetings?

N/A

21. Remarks

There was no apparent cost-savings in comparison to the previous year by having one face-to-face meeting in Atlanta and two Web-Based meetings in Fiscal Year 2018. Edward Chin retired from the committee on 1/31/2017 and did not participate in FY2018 meetings. This should have been reflected on the 2017 ACR.

Designated Federal Officer

Hazel D. Dean DFO

Committee Members	Start	End	Occupation	Member Designation
Ahuja, Shama	09/04/2014	09/05/2022	Council of State and Territorial Epidemiologists	Representative Member
Alvarez, Ana	08/09/2013	06/30/2020	University of Florida College of Medicine	Special Government Employee (SGE) Member
Armitige, Lisa	09/16/2014	06/30/2018	Heartland National TB Center	Special Government Employee (SGE) Member
Aronson, Naomi	11/13/2007	11/11/2022	Director, Infectious Disease Division, University of the Health Sciences	Ex Officio Member
Belknap, Robert	06/19/2018	06/30/2022	Denver Metro Tuberculosis Control Program	Special Government Employee (SGE) Member
Benjamin, Robert	09/14/2010	09/14/2022	National Association of County and City Health Officials	Representative Member
Bloom, Amy	06/30/2005	06/30/2022	U.S. Agency for Development	Ex Officio Member
Bodnar, Ulana	01/30/2017	01/28/2022	U.S. Marshals Service	Ex Officio Member
Bryden, David	05/10/2013	05/13/2022	RESULTS	Representative Member
Bur, Sarah	08/08/2011	08/08/2022	Federal Bureau of Prisons	Ex Officio Member
Campbell, Anthony	08/26/2015	08/26/2022	Substance Abuse and Mental Health Services Administration	Ex Officio Member
Cole, Barbara	07/05/2012	06/30/2018	Riverside County Department of Public Health	Special Government Employee (SGE) Member
Crosby, Kali	03/29/2016	03/29/2022	Agency for Healthcare Research and Quality	Ex Officio Member
Daley, Charles	11/15/2010	11/15/2022	American Thoracic Society	Representative Member
Du Melle, Fran	06/30/2005	06/30/2022	American Thoracic Society	Representative Member
Ekiek, Mayleen	05/24/2011	05/24/2022	Pacific Island Health Officers Association	Representative Member
Elkins, Karen	08/04/2015	08/04/2022	Food and Drug Administration	Ex Officio Member

Elson, Diana	10/01/2011	10/03/2022	Department of Homeland Security	Ex Officio Member
Farrow, Kenyon	02/05/2015	10/27/2017	Treatment Action Group	Representative Member
Flood, Jennifer	01/19/2017	06/30/2020	California Department of Health Services	Special Government Employee (SGE) Member
Fortune, Diana	06/15/2018	06/14/2019	National Tuberculosis Controllers Association	Representative Member
Freeman, Caroline	06/30/2005	03/23/2018	Department of Labor	Ex Officio Member
Hedrick, Eddie	11/01/2012	01/17/2017	Association for Professionals in Infection Control & Epidemiology	Representative Member
Hellerstedt, John	04/20/2018	04/20/2022	Association of State and Territorial Health Officials	Representative Member
Horne, David	07/13/2018	06/30/2022	University of Washington School of Medicine	Special Government Employee (SGE) Member
Horsburgh, Jr., Charles	07/09/2012	06/30/2018	Boston University School of Public Health	Special Government Employee (SGE) Member
Houpt, Eric	09/17/2014	06/30/2018	University of Virginia	Special Government Employee (SGE) Member
Iralu, Jonathan	04/13/2018	04/13/2022	Indian Health Service	Ex Officio Member
Lauzardo, Michael	09/22/2014	06/30/2018	University of Florida College of Medicine	Special Government Employee (SGE) Member
Levin, Ilse	12/07/2012	12/07/2022	American Medical Association	Representative Member
Lin, Matthew	02/06/2018	02/04/2022	Office of Minority Health	Ex Officio Member
Liu, Lixia	05/25/2018	06/30/2022	New Mexico Department of Health	Special Government Employee (SGE) Member
Madoori, Surajkumar	10/27/2017	10/28/2022	Treatment Action Group	Representative Member
Makhene, Mamodikoe	10/01/2006	10/03/2022	National Institutes of Health, National Institute of Allergy and Infectious Diseases	Ex Officio Member
Martin, Stephen	06/13/2013	06/13/2022	National Institute for Occupational Safety and Health	Ex Officio Member
Morris, Robert	08/22/2016	08/22/2022	National Commission on Correctional Health Care	Representative Member
Nerad, Thomas	04/23/2018	04/22/2022	Department of Labor/Occupational Safety and Health Administration	Ex Officio Member
Nilsen, Diana	06/28/2017	06/15/2018	National Tuberculosis Controllers Association	Representative Member
Njoo, Howard	05/01/2013	05/02/2022	Public Health Agency of Canada	Representative Member
Parham Hopson, Deborah	02/07/2017	04/27/2018	Health Resources and Services Administration	Ex Officio Member
Patrawalla, Ameer	02/03/2015	02/03/2022	American College of Chest Physicians	Representative Member
Rakeman, Jennifer	10/29/2012	10/28/2022	Association of Public Health Laboratories	Representative Member
Rangel, Gudelia	06/12/2013	06/10/2022	U.S.-Mexico Border Health Commission	Representative Member
Rappaport, Susan	08/18/2015	08/18/2022	American Lung Association	Representative Member
Ray, Susan	04/20/2011	04/20/2022	Infectious Disease Society of America	Representative Member
Reves, Randall	04/16/2014	04/15/2022	International Union Against TB and Lung Disease	Representative Member
Roselle, Gary	06/30/2009	06/30/2022	Department of Veteran Affairs	Ex Officio Member
Ruwe, Susan	08/20/2018	08/20/2019	Association for Professionals in Infection Control and Epidemiology	Representative Member
San Filippo, Bruce	11/12/2013	03/23/2018	U.S.-Mexico Border Health Commission	Ex Officio Member
Starke, Jeffrey	07/01/2015	06/30/2019	Texas Children's Hospital	Special Government Employee (SGE) Member
Sunstrum, James	10/03/2014	06/30/2018	Wayne County TB Clinic	Special Government Employee (SGE) Member
Tapper, Michael	06/30/2005	06/30/2022	Society for Healthcare Epidemiology of America	Representative Member
Taylor, Kevin	05/20/2016	05/20/2022	Department of Defense	Ex Officio Member
Temesgen, Zelalem	05/25/2018	06/30/2022	Mayo Clinic Center for Tuberculosis	Special Government Employee (SGE) Member
Tompkins, Lornel	04/10/2007	04/08/2022	National Medical Association	Representative Member
Velasco, Jose	02/24/2014	03/16/2018	U.S.-Mexico Border Health Commission	Ex Officio Member
Warshauer, David	09/22/2014	06/30/2018	Wisconsin State Laboratory of Hygiene	Special Government Employee (SGE) Member
Watts, Bobby	04/13/2017	04/13/2022	National Health Care for the Homeless Council	Representative Member
Weissman, David	10/26/2004	10/26/2022	National Institute for Occupational Safety and Health	Ex Officio Member

Number of Committee Members Listed: 60**Narrative Description**

The Council supports the agency's mission by bringing tuberculosis (TB) issues to national attention, particularly those having an impact on national health outcomes or goals. The Council reviews and evaluates CDC activities, guidelines and other national policies that impact TB control; provides input and recommendations; and monitors TB control and elimination efforts. The Council also forms issue-specific workgroups; publishes results and recommendations; provides direct feedback to CDC during meetings; communicates with other federal agencies on TB elimination issues; participates in consultations with outside organizations; collaborates with other TB groups; and communicates with the Secretary, Department of Health and Human Services (HHS).

What are the most significant program outcomes associated with this committee?

Checked if Applies

Improvements to health or safety	<input checked="" type="checkbox"/>
Trust in government	<input checked="" type="checkbox"/>
Major policy changes	<input checked="" type="checkbox"/>
Advance in scientific research	<input checked="" type="checkbox"/>
Effective grant making	<input type="checkbox"/>
Improved service delivery	<input checked="" type="checkbox"/>
Increased customer satisfaction	<input checked="" type="checkbox"/>
Implementation of laws or regulatory requirements	<input type="checkbox"/>
Other	<input type="checkbox"/>

Outcome Comments

N/A

What are the cost savings associated with this committee?

Checked if Applies

None	<input type="checkbox"/>
Unable to Determine	<input checked="" type="checkbox"/>
Under \$100,000	<input type="checkbox"/>
\$100,000 - \$500,000	<input type="checkbox"/>
\$500,001 - \$1,000,000	<input type="checkbox"/>
\$1,000,001 - \$5,000,000	<input type="checkbox"/>
\$5,000,001 - \$10,000,000	<input type="checkbox"/>

Over \$10,000,000
Cost Savings Other



Cost Savings Comments

There have not been any cost savings identified resulting from the committee's reports or recommendations.

What is the approximate Number of recommendations produced by this committee for the life of the committee?

154

Number of Recommendations Comments

The recommendations fall under these categories: Establishment of a new Latent Tuberculosis Infection Workgroup; submission of the Essential Components of Public Health Tuberculosis Prevention, Control, and Elimination Program report to ACET. ACET approved the proposed revision to the 2020 Report of Verified Case of Tuberculosis, the proposed recommendation for the 2018 Tuberculosis Technical Instructions to require the use of Interferon Gamma Release Assay in children 2-4 years of age, and revisions to recommendation 2 and 4 inclusion in CDC's updated three-month Isoniazid/Rifapentine Regimen (3HP) guidelines; and recommend CDC to implement prospective cohort studies of the rollout of 3HP-Self-Administered Therapy (SAT) in the population of persons who will be on this regimen to assess their rates of completion and tolerability.

What is the approximate Percentage of these recommendations that have been or will be Fully implemented by the agency?

68%

% of Recommendations Fully Implemented Comments

Narrative: For the life of this committee, 140 recommendations were either fully or partially implemented. Some recommendations have not been initiated by the agency.

What is the approximate Percentage of these recommendations that have been or will be Partially implemented by the agency?

23%

% of Recommendations Partially Implemented Comments

Working with program to update partially implemented recommendations on a routine basis.

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?

Yes ☒ No ☐ Not Applicable ☐

Agency Feedback Comments

CDC provides updates to the Council to respond to actions taken to implement ACET's recommendations or advice.

What other actions has the agency taken as a result of the committee's advice or recommendation?

Checked if Applies

Reorganized Priorities	<input checked="" type="checkbox"/>
Reallocated resources	<input type="checkbox"/>
Issued new regulation	<input type="checkbox"/>
Proposed legislation	<input type="checkbox"/>
Approved grants or other payments	<input type="checkbox"/>
Other	<input type="checkbox"/>

Action Comments

The agency works closely with the Chair of the Advisory Council to identify priorities and issues to be addressed at Advisory Council meetings. Prior to the meetings, the agency works with ACET to prepare agendas and provides background materials to Advisory Council members. The agency also provides support to ACET workgroups and as needed, to external experts to focus on priority issues under the authority of the Advisory Council.

Is the Committee engaged in the review of applications for grants?

No

Grant Review Comments

ACET is not a grant review committee.

How is access provided to the information for the Committee's documentation?

Checked if Applies

Contact DFO	<input checked="" type="checkbox"/>
Online Agency Web Site	<input checked="" type="checkbox"/>
Online Committee Web Site	<input checked="" type="checkbox"/>
Online GSA FACA Web Site	<input checked="" type="checkbox"/>
Publications	<input type="checkbox"/>

Other



Access Comments

<https://www.cdc.gov/maso/facm/facmacet.html>